

Docket No. 69014-B/GJG

Date: October 19, 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):	Kiran K.	Chada et	al.
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Serial No. : 10/768,566 Examiner: G. Chandra

Filed : January 29, 2004 Group Art Unit: 1646

For : METHODS OF TREATING OBESITY AND METABOLIC DISORDERS RELATED TO

EXCESS ADIPOSE TISSUE BY ADMINESTRATION OF S-FRP-5 PEPTIDE

Mail Stop Amendment COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment to the above-identified application.

Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

X No additional fee is required.

The filing fee is calculated as follows:

	Number after	Highest Number	· I		RATE			FEE	
	Amend- Previously ment Paid For1	Claims Presented	Small Entity	Other Entity		Small Entity	Other Entity		
Total		*	***			,			
Claims	10 -	20 =	0	X	\$25	\$50	=	0	
Indepen -dent Claims	2 -	**	***	Х	\$100	\$200	=	0	
Multiple Dependent Claim(s) Presented For First Time Yes X No			\$180	\$360	=	0			

TOTAL ADDITIONAL FEE \$ 0

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

^{*} If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

^{***} If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

Applicant(s): Kiran K. Chada et al. Serial No. : 10/768,566 : January 29, 2004 Amendment Transmittal Letter Page 2 The following are also enclosed: X One additional copy of this Amendment Transmittal Letter X Return Receipt Postcard An Information Disclosure Statement, including Form PTO-1449 (Copies of citations included: Yes_____ No____ and a fee of \$_____ included) X A Petition for an Extension of Time, including a fee of \$ 510.00 for a Petition for 3 Month(s) Extension of Time Other (identify): THE TOTAL FEE DUE IS \$ 510.00 . X A check in the amount of \$ 510.00 is enclosed. Please charge Deposit Account No. in the amount of _X The Commissioner is hereby authorized to charge any additional fees required or credit any overpayment to Deposit Account No. 03-3125 as follows: X Fees under 37 C.F.R. §1.16 for the presentation of extra claims

Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,

hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:

Mail Stop Amendment Commissioner for Patents

P.O. Box 1450

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